



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)

## BIB DATA SHEET

CONFIRMATION NO. 1051

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
|---------------|-----------------------|-------|----------------|---------------------|
| 10/553,877    | 09/05/2006<br>RULE    | 705   | 3686           | P70926USO           |

## APPLICANTS

Sophie Bassiez, Villebon sur Yvette, FRANCE;  
 Jean-Louis Testud, Paris, FRANCE;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/FR04/00976 04/21/2004

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

FRANCE 03/04931 04/22/2003

## \*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

11/25/2006

|                                |                                                                     |                     |                  |                 |              |                    |
|--------------------------------|---------------------------------------------------------------------|---------------------|------------------|-----------------|--------------|--------------------|
| Foreign Priority claimed       | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119(a-d) conditions met | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Initials            | FRANCE           | 4               | 9            | 1                  |

## ADDRESS

JACOBSON HOLMAN PLLC  
 400 SEVENTH STREET N.W.  
 SUITE 600  
 WASHINGTON, DC 20004  
 UNITED STATES

## TITLE

Device for assistance in the selection of a compression orthosis and in adapting same to the morphology of a limb

|                             |                                                                                                                   |                                                                                                                                                                                                                                                                           |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FILING FEE RECEIVED<br>1030 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|